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Bib Data Sheet

CONFIRMATION NO. 1790

SERIAL NUMBER 10/718,741	FILING DATE 11/20/2003 RULE	CLASS 250	GROUP ART UNIT 2878	ATTORNEY DOCKET NO. CQ10110
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APPLICANTS

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** CONTINUING DATA *****
None *Rw*

** FOREIGN APPLICATIONS *****
None *Rw*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 1	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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TITLE
 Imaging apparatus and method

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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